Ford Grant Committee

Travel Expense Statement

Name _____ SS# _____
Last First Mi

Title _____

Address _____ City/State _____
Zip _____

Travel Dates _____ to _____

Date	Time Departed / Arrived	Locations/Points Visited	Details of Subsistence - List Actual Meal Expense (Include Tip on Meal)			Attach Lodging Receipt	Total
			Breakfast	Lunch	Dinner	Lodging	
TOTALS							
Explain any unusual amounts of subsistence							
Mileage		Miles @		Cents per Mile			
Common Carrier, Taxi/Limousine (Explain in section on reverse side) Attach passenger copy of airline ticket							
Miscellaneous Expenses (Explain in section on reverse side)							
Total Cost							
Prepaid Expenses (Explain in section on reverse side)							
Net Cost							

Signed: _____ Date: _____

Approved: _____ Date: _____

Authorized use only: Check # & Date submitted _____ Initials _____